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CONFIRMATION NO. 6206

SERIAL NUMBER 10/721,808	FILING OR 371(c) DATE 11/25/2003 RULE	CLASS 606	GROUP ART UNIT 3733	ATTORNEY DOCKET NO. ZIM0143
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APPLICANTS

Antony J. Lozier, Warsaw, IN;
 Nicolas J. Pacelli, Winona Lake, IN;
 Sarah L. Thelen, North Manchester, IN;

** CONTINUING DATA *****

None mch

** FOREIGN APPLICATIONS *****

None mch

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 02/26/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY IN	SHEETS DRAWING 5	TOTAL CLAIMS 33	INDEPENDENT CLAIMS 4
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature: <i>Mark A. Brown</i> Initials: <i>mch</i>				

ADDRESS

43963

TITLE

Expandable reamer

FILING FEE RECEIVED 1090	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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